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Bib Data Sheet

CONFIRMATION NO. 7338

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/722,717 | <b>FILING OR 371(c)<br/>DATE</b><br>11/26/2003<br><b>RULE</b> | <b>CLASS</b><br>104 | <b>GROUP ART UNIT</b><br>2166 | <b>ATTORNEY DOCKET<br/>NO.</b><br>4060 |
|------------------------------------|---|---------------------|-------------------------------|--|

## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

None NKA

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None NKA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

08/06/2004

|  |                                   |                                 |                               |                                    |
|--|-----------------------------------|---------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | <b>STATE OR<br/>COUNTRY</b><br>WA | <b>SHEETS<br/>DRAWING</b><br>10 | <b>TOTAL<br/>CLAIMS</b><br>21 | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                   |                                 |                               |                                    |
| Verified and Acknowledged<br>Examiner's Signature <u>Naimek K. Agha</u> Initials <u>NKA</u>  |                                   |                                 |                               |                                    |

## ADDRESS

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## TITLE

System and method for providing computer support tools

|                                       |   |  |
|---------------------------------------|---|--|
| <b>FILING FEE<br/>RECEIVED</b><br>788 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                       |   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
|                                       |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
|                                       |   | <input type="checkbox"/> 1.18 Fees ( Issue )                   |
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